



Region 2

**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

08/25/2006

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER: NYR000140947

INSTALLATION NAME: MCCAREN MEWS LLC

INSTALLATION ADDRESS : 204 N 11TH ST
BROOKLYN, NY 11211

MAILING ADDRESS : 320 ROEBLING ST
BROOKLYN, NY 11211

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-3056**

**TO: MCCAREN MEWS LLC
or Current Occupant
ATTN: CHARLES SOSIK
320 ROEBLING ST
BROOKLYN, NY 11211**

new #

Walk in 8/1/06
Reopened ID #

URGENT

OMB#: 2050-0028 Expires 1/31/2006

ML

Call Charles Sosik

SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.		United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM	
1. Reason for Submittal (See Instructions on page 13.) MARK ALL BOX(ES) THAT APPLY		Reason for Submittal: <input checked="" type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) <input type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____) <input type="checkbox"/> As a component of the Hazardous Waste Report	
2. Site EPA ID Number (page 14)		EPA ID Number <u>NYR000140947</u>	
3. Site Name (page 14)		Name: <u>Mccaren News LLC</u> owned by <u>Grace Schwatz</u> 204 NORTH 11TH STREET, BROOKLYN, NEW YORK	
4. Site Location Information (page 14)		Street Address: 204 NORTH 11TH STREET	
		City, Town, or Village: BROOKLYN	State: NEW YORK
		County Name: NEW YORK	Zip Code: 11211
5. Site Land Type (page 14)		Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other	
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)		A. <u>976</u>	B. <u> </u>
		C. <u> </u>	D. <u> </u>
7. Site Mailing Address (page 15)		Street or P. O. Box: 320 ROEBLING STREET	
		City, Town, or Village: BROOKLYN	
		State: NEW YORK	
		Country: USA	Zip Code: 11211
8. Site Contact Person (page 15)		First Name: CHARLES <u>631 589 6353</u>	MI: B
		Last Name: SOSIK	
		Phone Number: <u>631 589 6353</u>	Extension: <u> </u>
		Email address: CSOSIK@PWGROSSER.COM	
9. Operator and Legal Owner of the Site (pages 15 and 16)		A. Name of Site's Operator: MCCAREN MEWS, LLC	
		Date Became Operator (mm/dd/yyyy): <u>FEB 26 '06</u>	
		Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other	
		B. Name of Site's Legal Owner: MCCAREN MEWS, LLC	
		Date Became Owner (mm/dd/yyyy): <u>FEB 26 '06</u>	
		Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other	

